

Product Code: 3005 UIN: IRDAN115P0005V01201819

Ref. No.13808077

Date: Aug 19, 2019

DIPESH THAKUR PATEL
NEAR P M C BANK BLDG NO 7 ROOM NO 225 TAGORE NAGAR VIKHROLI
EAST
MUMBAI
MAHARASHTRA 400083
Mobile No: 9619398986

Sub: Risk Assumption Letter

Dear Sir/Madam,

Thank you for choosing ICICI Lombard General Insurance Company Limited (ICICI Lombard) as your preferred service provider.
Please find enclosed Policy No. **3005/198526542/02/000**, which has been issued based on the below mentioned details:

| Insured & Vehicle Details | |
|---------------------------|------------------------------|
| Name of Insured | DIPESH THAKUR PATEL |
| Period of Insurance | Aug 22, 2019 to Aug 21, 2020 |
| Vehicle Make / Model | HONDA MOTORCYCLE / ACTIVA 4G |
| RTO City | MAHARASHTRA-MUMBAI |
| Vehicle Registration No. | MH03CR7805 |
| Vehicle Registration Date | Aug 22, 2017 |
| Engine No. | 36193 |
| Chassis No. | 35851 |
| Current Year NCB(%) | 25% |
| Previous Policy Details | |
| Previous Policy No. | 3005/134868646/01/000 |
| Previous Policy Period | Aug 22, 2018 to Aug 21, 2019 |
| Previous Year NCB(%) | 20% |
| Previous Insurer Name | ICICI LOMBARD |
| Previous Policy Type | Comprehensive Package |

The information provided above is based on the information received from you and accordingly, the policy has been processed. Coverage of risk is subject to realisation of the full premium, post which, insurance coverage under the policy would commence. In case the premium is not received by us due to cheque dishonour or any other reason, the insurance cover shall be void ab-initio.

We have issued the policy basis your confirmation that you hold a valid PUC and/or Fitness Certificate, as applicable

If you require any changes in the Certificate of Insurance cum Policy Schedule, you are requested to inform us by writing to customersupport@icicilombard.com or calling our 24 hour toll free helpline on 1800 2666. Absence of any communication within a period of 15 days of the date mentioned on this letter, would mean that the issued policy is in order and as per your proposal.

The information provided is merely illustrative and shall not be construed to be an evidence of existence of a contract of insurance. The Risk Assumption Letter is to be read in conjunction with the policy and shall be considered null and void without the same.

In case of a claim, immediately notify ICICI Lombard General Insurance Company Limited on the

Toll Free Number 1800 2666 or SMS "CLAIM" to 575758

For quick reference during emergencies, we recommend that you save the policy details and the contact numbers 1800 2666(Toll Free)/09223622666(Chargeable)
on your easily accessible mobile handset.

CERTIFICATE OF INSURANCE CUM POLICY SCHEDULE

1 Year-Two Wheeler Vehicles Package Policy

Product Code: 3005 UIN: IRDAN115RP0005V01201819



| | | | |
|----------------------------------|--|---------------------------------|--|
| Insured Name : | DIPESH THAKUR PATEL | Policy No : | 3005/198526542/02/000 |
| Address : | NEAR P M C BANK BLDG NO 7 ROOM NO 225 TAGORE NAGAR VIKHROLI EAST, MUMBAI, MAHARASHTRA 400083 | Period of Insurance : | Aug 22, 2019 12:00:00 to Midnight of Aug 21, 2020 |
| Telephone No : | Mobile No: 9619398986 | E-Policy No : | 3005/W-76761255/00/000 |
| Email Address : | DIPUPATEL1492@GMAIL.COM | Policy Issued On : | Aug 19, 2019 |
| Nominee : | - | Covernote No : | 198526542 |
| Name : | Select | RTO Location : | MAHARASHTRA-MUMBAI |
| Relationship : | - | Hypothecated : | - |
| Age : | - | To Invoice : | 100818525370 |
| GSTIN Number (Customer) : | Mumbai | Number : | 414, ICICI LOMBARD HOUSE, VEER SAVARKAR MARG, NEAR SIDDHI VINAYAK TEMPLE MAIN GATE, PRABHADEVI, MUMBAI, 400025, MAHARASHTRA |
| Servicing Branch Name | | Servicing Branch Address | |

| Registration No. | Make | Model | Type of Body | CC | Mfg Yr | Seating Capacity | Chassis No. | Engine No. |
|------------------|---------------------|----------------------------|---|--------------------------------|--------------------|------------------|-------------|------------|
| MH03CR7805 | HONDA MOTORCYCLE | ACTIVA 4G | Solo With Pillion | 109 | 2017 | 2 | 35851 | 36193 |
| Vehicle IDV (₹) | Side Car (₹) | Additional Accessories (₹) | Electrical / Electronic Accessories (₹) | Non Electrical Accessories (₹) | CNG / LPG Unit (₹) | Total IDV (₹) | | |
| 36722 | 0 | 0 | 0 | 0 | 0 | 36722 | | |

| Premium Details | | | |
|------------------------------------|------------|------------------------------------|-------------|
| OWN DAMAGE(A) | (₹) | LIABILITY(B) | (₹) |
| Basic OD Premium | 502 | Basic Third Party Liability | 752 |
| Road Side Assistance (TW-199) | 199 | Total | 752 |
| Sub Total | 701 | Add: | |
| Less: | | Unnamed PA Cover | 140 |
| No Claim Bonus 25% | 126 | PA Cover for Owner Driver | 375 |
| Sub-Total Deductions | 126 | Sub-Total | 1267 |
| Total Own Damage Premium(A) | 575 | Total Liability Premium(B) | 1267 |
| | | Total Package Premium(A+B): | 1842 |
| | | CGST | % 9 |
| | | | ₹ 165.78 |
| | | SGST | % 9 |
| | | | ₹ 165.78 |
| | | Total Tax Payable in ₹ | 332 |
| | | Total Premium Payable In ₹ | 2174 |

| | |
|------------------------------------|--|
| Geographical Area: India | Applicable IMT Clauses: 16 , 22 |
| Compulsory Deductible: ₹100 | Voluntary Deductible: ₹0 |

| |
|--|
| Insured Declared Value |
| The schedule of age-wise insured declared(IDV) as shown in the below table is applicable for the purpose of Total loss including Theft/Constructive Total Loss(TL/CTL) claims only on basis of loss date falling in the respective year. A vehicle will be considered to be a CTL, where the aggregate cost of retrieval and/or repair of the vehicle subject to terms and conditions of the policy exceeds 75% of the IDV |

| Tenure | Total IDV (₹) |
|-----------------------------------|---------------|
| From Aug 22, 2019 To Aug 21, 2020 | 2174 |

| | | | | | |
|------------------------|-----------------|----------------|---------------------------------------|--------------|------------|
| Premium Collection No. | 1080701231 | Premium Amount | ₹ 2174 | Receipt Date | 19/08/2019 |
| GSTIN Reg.No | 27AAACI7904G1ZN | HSN/SAC code | 00440005 / GENERAL INSURANCE SERVICES | | |

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 on your easily accessible mobile handset.

Mailing Address: 401 & 402, 4th Floor, Interface 11, New Linking Road, Malad (West), Mumbai - 400 064, IRDA Reg. No. 115, CIN: L67200MH2000PLC129408

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Limits of Liability: (a) Under Section II-I(i) of the policy: Death of or bodily injury - Such amount as is necessary to meet the requirements of the Motor Vehicles Act 1988. (b) Under Section II-I(ii) of the policy: Damage to Third Party Property ` 100000/-; PA Cover for Owner-Driver under Section III: CSI ` 100000/-. Limitations as to Use: The Policy covers use of the vehicle for any purpose other than: Hire or Reward, Carriage of goods (other than samples of personal luggage), Organised racing, Pace Making, Reliability trails or Speed testing, any purpose in Connection with Motor Trade. Driver's Clause: Any person including the insured: Provided that a person driving holds an effective driving license at the time of the accident and is not disqualified from holding or obtaining such a license. Provided also that the person holding an effective learner's license may also drive the vehicle and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicles Rules, 1989. Important Notice: The insured is not indemnified if the vehicle is used or driven otherwise than in accordance with this schedule. Any payment made by the Company by reason of wider terms appearing in the Certificate in order to comply with the Motor Vehicle Act, 1988 is recoverable from the insured. See the clause headed "AVOIDANCE OF CERTAIN TERMS AND RIGHT OF RECOVERY". For Legal interpretation, English version will hold good. Disclaimer: Please visit www.icicilombard.com for the policy wordings, for complete details on terms and conditions governing the coverage and NCB. This document is to be read with the policy wordings. The policy is valid subject to realization of cheque. We accept premium only via legally recognized modes. In case of dishonour of premium cheque, the company shall not be liable under the policy and the policy shall be void ab-initio. In case of any discrepancy with respect to the policy, please revert within 15 days from the policy start date. This policy is underwritten on the basis of the information provided by you and as detailed in the Risk Assumption Letter shared with you along with the policy. On renewal, the benefits provided under the policy and/or terms and conditions of the policy including premium rate may be subject to change. Grievance Redressal: For resolution of any query or grievance you may contact us on our toll free no. 1800 2666, or visit any of our branch offices. You can also write to us at customersupport@icicilombard.com. For detailed grievance redressal mechanism please visit the "Grievance Redressal" section on our website www.icicilombard.com.

I/We hereby certify that the Policy to which this Certificate relates, as well as, this Certificate of Insurance are issued in accordance with the provisions of Chapter X and Chapter XI of Motor Vehicle Act, 1988. In witness whereof, this Policy has been signed at Mumbai on this date of Aug 12, 2018 in lieu of Covernote no. 134868646. The stamp duty of ` 0.5 paid vide deface no. MH004065018201819M dated Jul 18, 2018.

Policy Issuing Office: ICICI Lombard General Insurance Company Limited, ICICI LOMBARD HOUSE, 414, Veer Savarkar Marg, Near Siddhi Vinayak Temple, Prabhadevi, Mumbai 400 025.



Agency Code : AABCJ0753B43871
Agency Name : JHAVERI AUTO PVT
LIMITED
Agent's Contact No : 9820023080

Digitally signed by
SANJAY DATTA
Date: 2019.08.19
12:13:34 IST

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Aug 19, 2019

CORP/SUP/OPI/2014/1777